

**Work Order ID 90090**

September-13-12 1:09:01 PM

**\*90090\***

Page 1

Item ID: D3265-041

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Basket Base Assembly

Stop

**\*NS2\***

Start Date: 9/12/12 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/19/12 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 12-09-13 Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3265	E								
100	Weid per dwg A/R S.S. rod Batch <u>4123823</u> 0.00								
<b>*100*</b> Large Fab	Memo	0.00							
Large Fab	1- Assemble and weld as per Dwg D3265 using DT9444								
	2- Deburr and remove all markings from material as required								
	3- weld mesh as per dwg								
110	QC9- Inspect visual per QSI004- Fusion Welds	0.00							
<b>*110*</b> QC	Memo	0.00							
Quality Control									

g2s gtruls - A

SY 13-08-22 ①x  
CP 13-8-26DAS  
09  
S.C.

B-08-27

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data <input type="checkbox"/>	Equip/Tooling <input type="checkbox"/>										
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear				General							
Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>							
Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>							
Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>							
Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>							
Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>								
Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>								
Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>								
Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	Other <input type="checkbox"/>								
Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>									
Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>									
Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>									

**Work Order ID 90090**

September-13-12 1:09:01 PM

\*90090\*

Page 2

Item ID: D3265-041

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Basket Base Assembly

Stop

\*NS2\*

Start Date: 9/12/12 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 10/19/12 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 <b>*120*</b> QC Quality Control	QC6- Inspect dimensions to drawing  Memo	0.00 0.00							B0807 DAS 09 89

130 White Gloss(Ref.4.3.5.1) per QSI005 4.3-Alum 0.00

**\*130\***  
Powdercoat  
Powder Coating

Memo  
 1ST COAT: 2 1/4 S 0.00  
 START TIME: 2:40:00 P  
 OVEN TEMPERATURE:  
 FINISH TIME: 3:15  
 \*\*\*if necessary  
 2ND COAT: 3:30:00 P  
 START TIME: 3:30:00 P  
 OVEN TEMPERATURE:  
 FINISH TIME: 4:00  
 4:00

LX/M/13/08/28

W126125

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order:		DISPOSITION			AGAINST DEPARTMENT/PROCESS						
		Rework	<input type="checkbox"/>	Skid-tube	<input type="checkbox"/>	Crosstube	<input type="checkbox"/>	Water Jet	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
		Scrap	<input type="checkbox"/>	Machining	<input type="checkbox"/>	Small Fab	<input type="checkbox"/>	Prod. Eng. Coor.	<input type="checkbox"/>	Quality	<input type="checkbox"/>
		Use-as-is	<input type="checkbox"/>	Thermoforming	<input type="checkbox"/>	Finishing	<input type="checkbox"/>	Rec/Store/Packaging	<input type="checkbox"/>	Other	<input type="checkbox"/>
		Work Order Update	<input type="checkbox"/>	Large Fab	<input type="checkbox"/>	Composite	<input type="checkbox"/>	Supplier	<input type="checkbox"/>		
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

**Work Order ID 90090****\*90090\***

Page 3

September-13-12 1:09:01 PM

Item ID: D3265-041

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Basket Base Assembly

Stop

**\*NS2\***

Start Date: 9/12/12 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/19/12 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140 <b>*140*</b> QC Quality Control	QC3- Inspect Part Finish Memo	0.00	DAS 27 9-89						
			13-8-29						
150 <b>*150*</b> Small Fab Small Fab	Small Fab Memo	0.00							
			13-8-29						
160 <b>*160*</b> QC Quality Control	QCS- Inspect part completeness to step on W/O Memo	0.00	DAS 27 9-89						
			13-8-29						

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS								
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	

**Work Order ID 90090****\*90090\***

Page 4

September-13-12 1:09:01 PM

Item ID: D3265-041

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Item Name: Basket Base Assembly

Stop

**\*NS2\***

Start Date: 9/12/12 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 10/19/12 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

170

**\*170\***

Packaging

Packaging

Identify as per dwg &amp; Stock Location:

D32657-045.A.

885%

13 8-29

180

**\*180\***

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

13/9/30

MF  
13-8-29

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____		DISPOSITION		AGAINST DEPARTMENT/PROCESS							
Part No. _____		Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>					
NCR No. _____		Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>					
		Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>					
		Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>						
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio		<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <hr/> <hr/> <hr/>	
										<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
										<input type="checkbox"/> Other	

# Picklist Print

September-13-12 1:09:00 PM

Page 1

Work Order ID: 90090

Parent Item: D3265-041

Start Date: 9/12/12

Required Date: 10/19/12

Parent Item Name: Basket Base Assembly

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:C Re-Format 05-11-03 JLM

IPP Rev:D 08-09-10 revC as per dwg (ecn 08-524) DD verf: by:EC IPP RevE: as per DEO DD

10.09.12 verified by:EC IPP RevF: revise seq 110 DD 10.01.28 verified by:EC IPP

REV:G 12.07.26 AS PER DWG REV.D DD VERF:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2232-3 Basket Hinge		Manufactured	No			100	Each	44.0000	2	2		13-08-21	PD

Location	Loc Qty	Loc Code
WA	42	
86362	9	
86914	11	
89358	22	
WA005	2	
75581	2	

B9B473 → ②

D2235-1 Basket Rib	Manufactured	No	100	Each	19.0000	1	1	13-08-21	PD
-----------------------	--------------	----	-----	------	---------	---	---	----------	----

Location	Loc Qty	Loc Code
WA	15	
85602	4	
86051	1	
86668	10	
WA005	4	
66895	4	

B9B285 → ①

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

# Picklist Print

September-13-12 1:09:00 PM

Page 2

Work Order ID: 90090

Parent Item: D3265-041

Parent Item Name: Basket Base Assembly

Start Date: 9/12/12

Required Date: 10/19/12

Start Qty: 1.00

Required Qty: 1.00

D2581  
Mounting Bracket

Manufactured No

100 Each 157.0000

2 2

13-08-21 PD

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

WA	154	
----	-----	--

82506	2	
83230	3	
85452	2	
86367	39	
86961	28	
87706	20	
88574	60	

WA005	3	
-------	---	--

70766	2	
81253	1	

Manufactured No	100	Each	0.0000
-----------------	-----	------	--------

1 13-08-21 PD

Manufactured No	100	Each	8.0000
-----------------	-----	------	--------

1 13-08-21 PD

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

WA006	8	
-------	---	--

51483	4	
55842	4	

Manufactured No	100	Each	8.0000
-----------------	-----	------	--------

2 13-08-21 PD

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

WA006	8	
-------	---	--

51485	4	
51868	4	

13-08-21 PD

D3265-043  
Rib Assembly

D3265-1  
Rib

D3265-5  
Rib

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS						
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____  NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Picklist Print

September-13-12 1:09:00 PM

Page 3

Work Order ID: 90090

Parent Item: D3265-041

Parent Item Name: Basket Base Assembly

Start Date: 9/12/12

Required Date: 10/19/12

Start Qty: 1.00

Required Qty: 1.00

D3442-5  
Shim

Manufactured No

100 Each 20.0000

4 4

B-08-21 PD

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

WA	10	
----	----	--

86836	10	
-------	----	--

WA005	10	
-------	----	--

33282	10	
-------	----	--

B102129 - (2)

(2)

\_\_\_\_\_

\_\_\_\_\_

D3825-041

Rib Assembly (Basket End)

Manufactured No

100 Each 4.0000

2 2

B-08-21 PD

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

WA006	4	
-------	---	--

87755	4	
-------	---	--

B98492 - (2)

(2)

\_\_\_\_\_

\_\_\_\_\_

D3826-041

Rib / Gusset Assembly

Manufactured No

100 Each 6.0000

2 2

B-08-21 PD

B104951 - (2)

1

B102105 13-08-21

2

B99268 - 2x

13-08-23

D3832-11

Mesh (Base)

D3833-1

Mesh (Base End Face)

Manufactured No

100 Each 0.0000

Manufactured No

100 Each 22.0000

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

WA	7	
----	---	--

77521	4	
-------	---	--

89208	3	
-------	---	--

WA035	15	
-------	----	--

81259	1	
-------	---	--

85697	5	
-------	---	--

89766	9	
-------	---	--

NCR: Yes / No

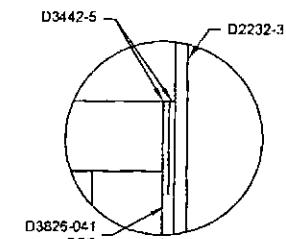
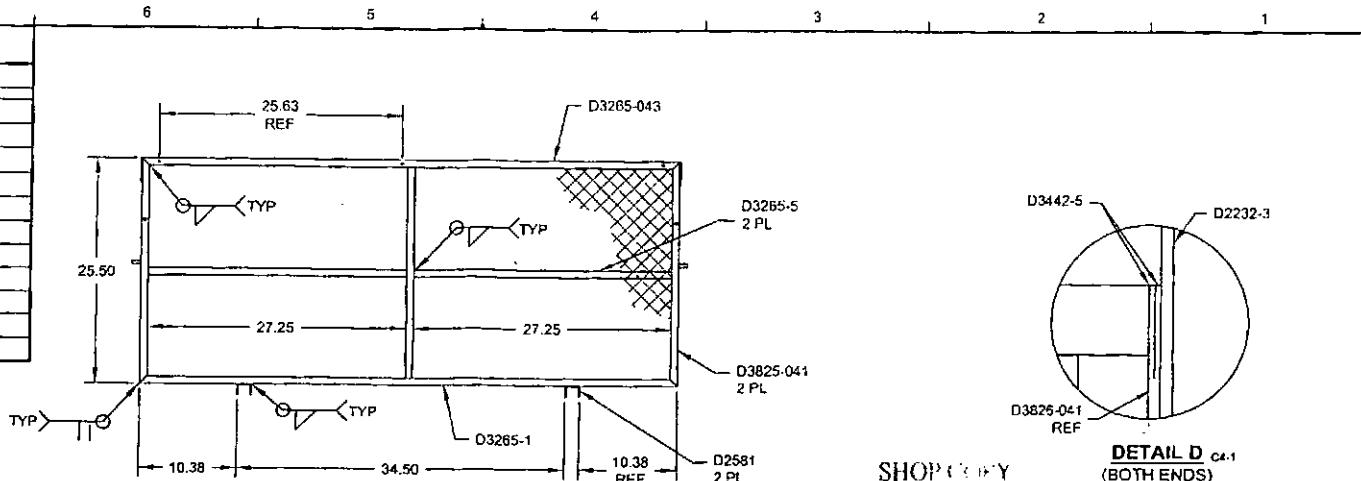
DQA: Date:

## **WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____				DISPOSITION		AGAINST DEPARTMENT/PROCESS					
				Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>			
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending				Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>				
Centre Not Concentric to O/S				BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>				
Cracks				Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>				
Crushed/Crimped				Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>				
Cuffs				Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>					
Heat Treat				Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>					
Inspection Strip in Tube				Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	Other <input type="checkbox"/>				
Ripples in Bend				Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>						
Torque Waves in Extrusion				Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>						
Turning Sequence				Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>						
Wave/Twist in Tube				Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>						

QTY	PART NUMBER	DESCRIPTION
1	D3265-041	BASKET BASE ASSY
2	D2732-3	HINGE PLATE
1	D2235-1	RIB
2	D2581	MOUNTING BRACKET
1	D3265-1	RIB
1	D3265-043	RIB ASSY
2	D3265-5	RIB
4	D3442-5	SHIM
2	D3825-041	RIB ASSY
2	D3826-041	RIB/GUSSET ASSY
1	D3832-11	MESH (BASE, SM)
2	D3833-1	MESH, BASE END FACE



SHOP DRAWING  
RETURN TO

DETAIL D C4.1  
(BOTH ENDS)  
SCALE 10X

ENGINEER C4.1

UNCONTROLLED COPY

SUBJECT TO AMENDMENT

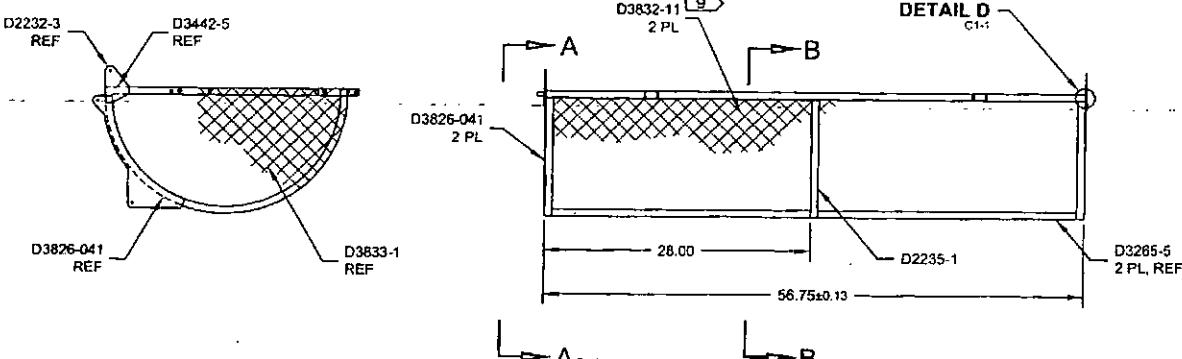
WITHOUT NOTICE

WORK ORDER

RELEASED

2012-08-03

12-09-13



D3265-041 BASKET BASE ASSEMBLY

NOTES:

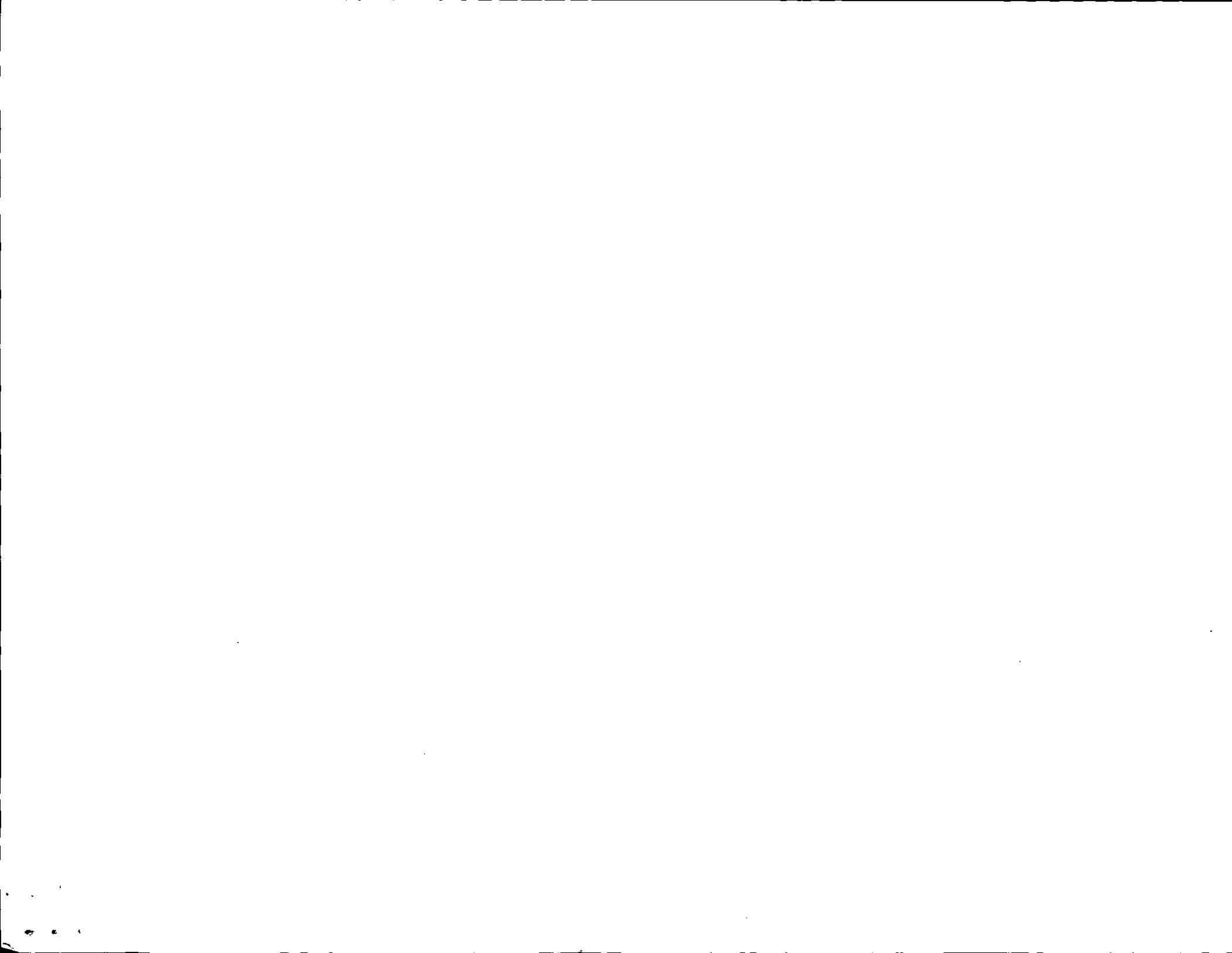
- 1) MATERIAL: N/A
- 2) FINISH: POWDER COAT ASSEMBLY GLOSS WHITE (4.3.5.2) PER DART QSI 005 4.3
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) WELD PER DART QSI 004
- 9) SKIN INSIDE SURFACE OF BASKET WITH D3832-11, TACK WELD EACH END OF STRAND TO FRAME

E	CORRECTED 53.25 DIM SHIFTED AT LAST REV (ZNC3.3).	MB	12.07.26
D	REVISED PARTS LIST: QTY(2) D3826-041 REPLACE QTY(4) D2232 & QTY(2) D2235-1; QTY(1) D3265-043 REPLACES QTY(1) D3265-1; QTY(4) D3442-5 WAS QTY(2); REMOVED D3265-3 ADD D3265-7; D3825-041 WAS D3265-3; CREATED D3265-043; ADDED D3832-11 AND D3833-1. REASON: PAR10-60.	MB	12.05.14
C	DRAWING UPDATED TO CURRENT STANDARDS. SHIT 4 ADDED. RIB MATERIAL WAS 0.060 THICK. SHIT 2 ZONE 05 25.63 DIMENSION WAS 27.63.	AJS	08.08.14
B	INCORPORATED A1. ADD SHIM UNDER HINGES. ADD HOLES FOR SPLIT LID BASKETS.	PH	05.08.08
A	NEW ISSUE	CP	04.02.02
REV.	DESCRIPTION	BY	DATE
DESIGN	DS	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN		DRAWING NO. D3265	
CHECKED		REV. E	SHEET 1 OF 3
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	12.07.26	SCALE	NTS

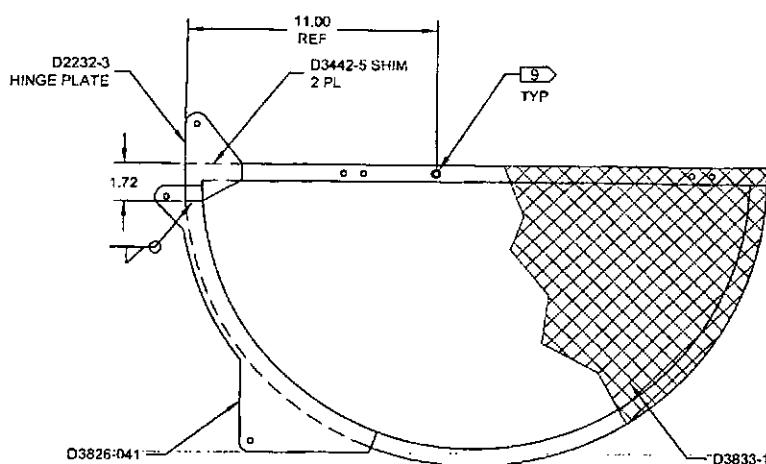
Copyright © 2004 by DART Aerospace Ltd.

This document is private and confidential, and is the sole property of DART Aerospace Ltd. It is not to be reproduced or distributed without the express written permission of DART Aerospace Ltd.

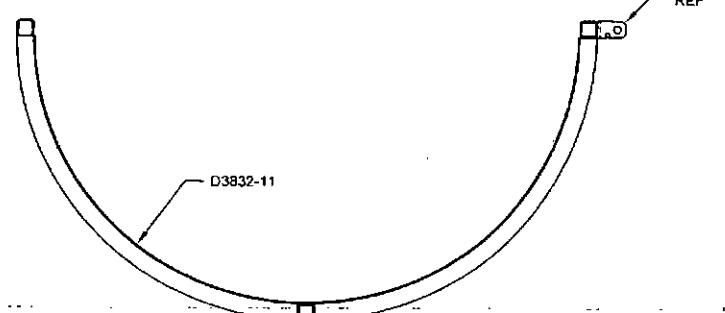
First copy of this document was issued on 12/07/2004.



90090



SECTION A-A 86-1  
2 PL  
(BOTH END RIBS)



SECTION B-B 86-1  
2 PL  
(BOTH CENTER RIBS)

[RELEASER]  
2012-08-03  
VM

NOTES:

- 1) MATERIAL: N/A
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: N/A
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) WELD PER DART QSI 004
- 9) TRIM EXPANDED METAL LOCALLY AS REQUIRED, TYP BOTH ENDS

DESIGN	DS	DART AEROSPACE LTD
DRAWN	✓	HAWKESBURY, ONTARIO, CANADA
CHECKED	✓	DRAWING NO. D3265 REV. E
MFG. APPR.	✓	SCALE SHEET 2 OF 3
APPROVED	✓	TITLE BASKET BASE ASSEMBLY (350) NTS
DE APPR.	✓	DATE 12.07.26

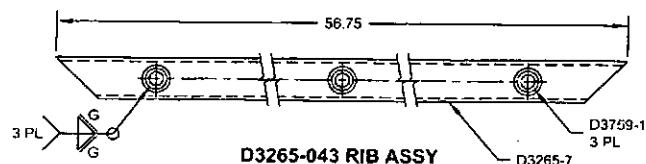
COPYRIGHT © 2004 BY DART AEROSPACE LTD.  
THE DOCUMENT CONTAINS TRADE AND CONFIDENTIAL INFORMATION OWNED BY DART AEROSPACE LTD.  
IT IS NOT TO BE USED FOR ANY PURPOSE OTHER THAN THAT FOR WHICH IT WAS PROVIDED.  
PRINTED IN CANADA FROM DART AEROSPACE LTD.



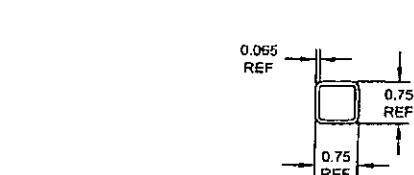
90090

QTY	PART NUMBER	DESCRIPTION
.043	D3265-043	RIB ASSY
1	D3265-7	RIB
3	D3759-1	BUSHING

D



D3265-043 RIB ASSY



TYP SECTION

## NOTES:

- 1) MATERIAL: AISI 304/316 SEAMLESS STAINLESS STEEL SQUARE TUBING PER ASTM A554/A269 MILL FINISH, 0.75 X 0.75 X 0.065 WALL REF. DART SPEC M304TS0.75W.065
- 2) FINISH: NONE
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: N/A
- 7) WEIGHT: N/A
- 8) WELDING: PER DART QSI 004

8

7

6

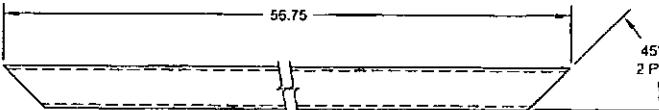
5

4

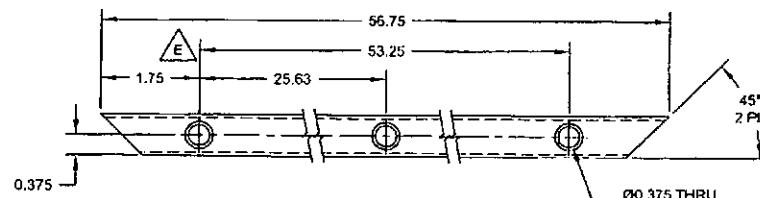
3

2

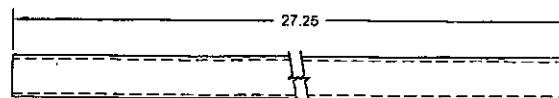
1



D3265-1 RIB 1



D3265-7 RIB 1



D3265-5 RIB 1

RELEASED  
2012-08-03  
W

DESIGN	DS	DART AEROSPACE LTD	
DRAWN		HAWKESBURY, ONTARIO, CANADA	
CHECKED		DRAWING NO.	REV. E
		D3265	SHEET 3 OF 3
MFG. APPR.		TITLE	SCALE
APPROVED		BASKET BASE ASSEMBLY (350)	NTS
DE APPR.			
DATE	12.07.26		

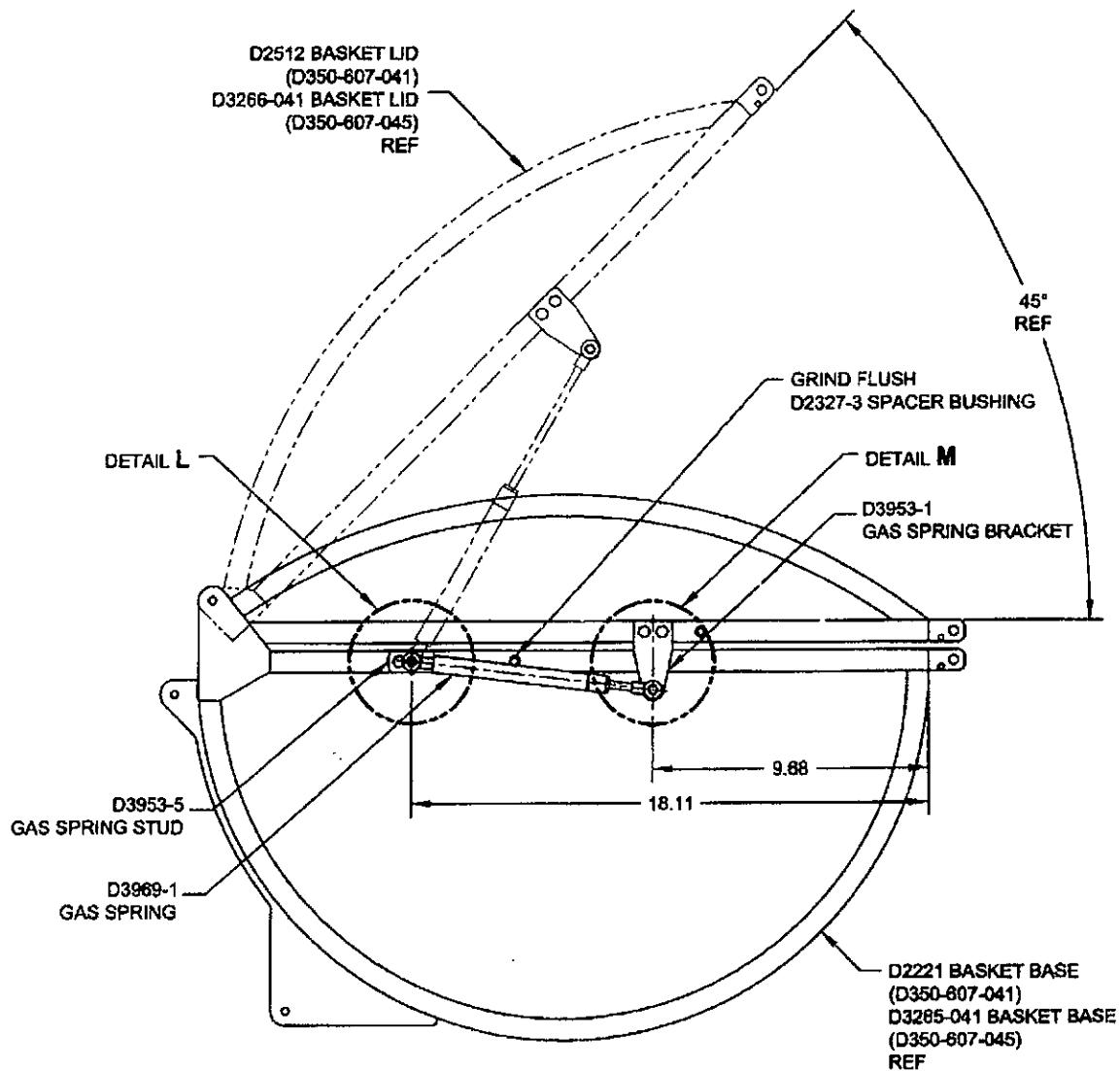
COPYRIGHT © 2004 BY DART-AEROSPACE LTD

THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL, AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT

NOT TO BE COPIED OR DISCLOSED TO ANY OTHER PERSON, OR FOR ANY OTHER PURPOSE, WITHOUT

WRITTEN PERMISSION FROM DART-AEROSPACE LTD





D350-607-141 AUTOMATIC LID OPENER INSTALLATION  
(BOTH ENDS)

D350-607-145 AUTOMATIC LID OPENER INSTALLATION  
(1 END ONLY)

*Figure 8a – Automatic Lid Opener Installation*

\* COPYRIGHT © 1994 BY DART AEROSPACE LTD \*  
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED  
OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.

Revision: A  
Date: 10.03.10

